

**SAMPLE MAPPING #2**  
**NEBRASKA FORM 85:**  
**AIRCRAFT FUELS TAX RETURN**

**TRANSACTION SET HEADER EXAMPLE #2**

**Notes:** Please reference the attached sample forms to compare to this EDI mapping.

The Header contains only required data from the Form 85. This includes Line 14, identification and address information. Other line items are either in the Detail portion or are not captured.

1 ST~813~0009\  
2 BTI~T6~NE85~47~NE16~20000219~R(space)&(space)~24~476332002~49~0662213~~~00~\  
3 DTM~194~20000131~~~\  
4 TIA~5067~~1000\  
5 TIA~5025~0\  
6 N1~TP~R & J OIL CORP\  
7 N3~3430 SCOTTSDALE BLVD~\  
8 N4~ANYTOWN~NE~68121~US\  
9 N1~31~R & J OIL CORP\  
10 N3~PO BOX 1600~\  
11 N4~ANYTOWN~NE~68121~US\  
12 PER~TP~DAVID L. RASMUSSEN~TE~4025550998~FX~4025551098~  
EM~DRASMUSSEN@AOL.COM\

**FORM 85: TRANSACTION SET DETAIL EXAMPLE #2**

**Notes:** The Detail contains only the REF, for no activity. In this example, the TFS segment is coded to indicate that no schedules are used.

13 TFS~T2~NE85\  
14 REF~BE~1\

**FORM 85: TRANSACTION SET TRAILER EXAMPLE #2**

**Notes:** The Trailer “SE” segment counts the number of segments within ST-SE loop, including the ST and SE. The SE also contains a control number that ties it to the ST.

15 SE~15~0009\



# Nebraska Aircraft Fuels Tax Return

FORM  
**85**

• Read instructions on reverse side & complete enclosed schedules

PLEASE DO NOT WRITE IN THIS SPACE

Federal Employer Identification Number      Tax Month      Nebraska Identification Number  
47-6332002      January 2000      0662213

If your payment is being made by Electronic Funds Transfer, check here. ☐

R & J OIL CORP  
3430 SCOTTSDALE BLVD  
ANYTOWN NE 68121

R & J OIL CORP  
PO BOX 1600  
ANYTOWN NE 68121

☐ Check this box to CANCEL.  
Attach license and indicate cancellation date \_\_\_\_\_

COLUMN 1  
AVIATION GASOLINE

COLUMN 2  
AVIATION JET FUELS

• ROUND TO WHOLE GALLONS AND DOLLARS. Round down all amounts less than .50 and round up all amounts of .50 through .99.

## RECEIPTS — All Gallons are Gross Gallons

1 Total gallons received tax paid (attach MFR Sch. Code 1) .....	1	0	0
2 Total gallons received tax free (attach MFR Sch. Codes 2 & 3) .....	2	0	0

## DISBURSEMENTS — All Gallons are Gross Gallons

3 Total gallons sold tax free (attach MFD Sch. Code 6) .....	3	0	0
4 Total gallons exported to other states (attach MFD Sch. Code 7) .....	4	0	0
5 Total gallons sold to federal agencies and Native Americans (attach MFD Sch. Codes 8 & 10) ....	5	0	0
6 Total tax-free disbursements (total of lines 3, 4, & 5) .....	6	0	0
7 Total gallons sold tax paid to licensed suppliers, distributors, wholesalers, importers, and retailers (attach MFD Sch. Code 5) .....	7	0	0

## TAX CALCULATION

8 Total gallons of aviation gasoline subject to tax (line 2 minus line 6) .....	8	0	
9 Total gallons of aviation jet fuel subject to tax (line 2 minus line 6) .....	9		0
10 Total aviation gasoline fuel tax (line 8, column 1 multiplied by .05) .....	10	\$ 0	00
11 Total aviation jet fuel tax (line 9, column 2 multiplied by .03) .....	11		\$ 0 00
12 Total aviation gasoline and jet fuel tax (line 10, column 1 plus line 11, column 2) .....	12		0 00
13 Commission ( .0475 on first \$5,000 PLUS .0225 on excess over \$5,000) .....	13		0 00
14 Aircraft fuels tax due (line 12 minus line 13) .....	14		0 00
15 Previous balance .....	15		
16 BALANCE DUE (line 14 plus line 15). Pay in full with return .....	16	\$	0 00

Under penalties of law, I declare that I have examined this return and schedules, and to the best of my knowledge and belief, they are correct and complete.

sign  
here

*David L Rasmussen*

Authorized Signature

*Owner*

Title

( 402 ) 555-0998

Telephone Number

*2-19-2000*

Date

Signature of Preparer Other than Taxpayer

Address

( )

Telephone Number

Date

THIS RETURN IS DUE ON OR BEFORE THE 20TH DAY OF THE MONTH FOLLOWING THE TAX MONTH INDICATED ABOVE.

Mail the original return, schedules, and payment to: MOTOR FUELS DIVISION, P.O. BOX 98904, LINCOLN, NE 68509-8904